



## **Center for Community Preparedness - Fact Sheet**

The Center for Community Preparedness (CCP) serves as the catalyst that efficiently carries out the roles and responsibilities of the Emergency Support Function (ESF)- 8. ESF-8 is responsible for providing leadership for planning, directing and coordinating the overall State efforts to provide public health and medical services. The CCP uses an all-hazards approach to “integrate State and local public health jurisdictions’ preparedness for and response to public health threats. The CCP is organized according to National Incident Management System, Incident Command Structure to facilitate management for: Administration/Finance, Logistics, Operations and Planning. The CCP provides strategic direction in the development and implementation of plans that protect all citizens of this state from bioterrorist attacks, emergent infectious diseases such as H1N1 and preventative medical needs. Reduced funding would seriously impact the Center’s ability to respond to natural and man-made disasters, which would result in loss of lives.

### **Objective**

The Center’s goal is to build healthy, resilient communities through preparation, prevention, and response. The Center sets priorities/goals as defined by the Centers for Disease Control and the Department of Health and Human Services Hospital Preparedness Program. Goals are as follows: Prevent, Detect and Report, Investigate, Control, Recover and Improve. Goals in their entirety are listed in the narrative. The purpose of the program is to develop emergency-ready public health departments by upgrading, integrating and evaluating state and local public health jurisdictions’ preparedness for and response to terrorism, pandemic influenza, and other public health jurisdiction preparedness for man-made and natural disasters.

### **Performance Indicators**

- CDC PHEP Cooperative Agreement
- Trust for America’s Health Report
- Real-Life and Exercise CAPs
- National Report Card on Emergency Preparedness

The PHEP cooperative agreement provides funding to enable public health departments to have the capacity and capability to effectively respond to the public health consequences of not only terrorist threats, but also infectious disease outbreaks, natural disasters, and biological,

chemical, nuclear, and radiological emergencies. These emergency preparedness and response efforts are designed to support the National Response Framework (NRF) and the National Incident Management System (NIMS) and are targeted specifically for the development of emergency-ready public health departments. CDC provides PHEP cooperative agreement funding to 62 grantees, which include 50 states, eight territories (Puerto Rico, the Virgin Islands, American Samoa, Commonwealth of the Northern Mariana Islands, Guam, Republic of the Marshall Islands, Republic of Palau, and the Federated States of Micronesia), and four metropolitan areas (Washington, D.C., Chicago, Los Angeles County and New York City). CDC's Coordinating Office for Terrorism Preparedness and Emergency Response, Division of State and Local Readiness, administers the PHEP cooperative agreement and works closely with subject matter experts across CDC to provide annual guidance and technical assistance to state, territorial, and major metropolitan public health departments.

The following are priorities of the agreement and the Pandemic and All-Hazards Preparedness Act:

- 1) National Preparedness and Response, Leadership, Organization, and Planning
- 2) Public Health Security Preparedness
- 3) All-Hazards Medical Surge Capacity response workers

The CCP is comprised of the following programs: Administration and Finance, Logistics, Operations, Planning, Community Outreach, Medical Social Services, Volunteer Management, and Workforce Development. These programs are responsible for the management of the Strategic National Stockpile, Cities Readiness Initiative, Biohazard Detection System, Chempack program, Health Alert Network (HAN), Pandemic Influenza, and warehouse management of all ESF-8 state and federal assets. The DHH Emergency Operations Center is also the responsibility of the CCP and responsible for the public health and medical operations of the Medical Special Needs Shelters, Bus Triage, Federal Medical Stations (FMS), Critical Transportation Needs Shelters (CTNS), during natural and man-made disasters. Descriptions of Center initiatives are listed below:

- **Emergency Preparedness Planning Section** within the Center for Community Preparedness is the home of the agency's 35+ emergency plans. Plans are developed, trained and later exercised to develop corrective actions/improvements.
- **Volunteer Management** is the program by which emergency volunteers are recruited, retained, trained, and deployed in the State of Louisiana for public health emergencies and day-to-day activities. Volunteer Management provides a pool of pre-credentialed and pre-identified volunteer staff (medical and non-medical).

- **Community Outreach** supports education and outreach related to the Strategic National Stockpile/Cities Readiness Initiative, Point of Dispensing Site planning, Pandemic Influenza, Biological terrorism, CHEMPACK/Chemical terrorism, and Radiological/Nuclear incidents while supporting the mission of the Department of Health and Hospitals is to protect and promote health and to ensure access to medical, preventive, and rehabilitative services for all citizens of the State of Louisiana.
- The **Logistics Section** is comprised of four key programs: Strategic National Stockpile (SNS), Medical Supply Sustainment (Warehouses/Trailers), Tactical Communications, and Emergency Operations Center (EOC) Management. Logistics supports state medical operations/medical services, such as Medical Special Needs Shelter, Federal Medical Stations, Medical Institution Evacuation Plan, Temporary Medical Operations Staging Area, Search And Rescue Base Of Operations, Critical Transportation Needs Shelter, Federally Qualified Health Centers (FQHC), hospitals, and parishes by providing the medical equipment that may be needed during an event as well as the equipment and supplies that may be needed in preparation for an event.
- The **Operations Section** provides medical staffing and/or coordination of services for those seeking refuge in Louisiana's 8- Medical Special Needs Shelter, 5-Critical Transportation Needs Shelter, 3-Federal Medical Station, Bus Triage process for the 9 Office of Public Health regions and for the statewide Re-entry process (In-State/out of State which enables citizens to return to their home of residence).
- The **Workforce Development (WFD) Program** of the Office of Public Health (OPH) to ensures the competency of this workforce by developing, promoting, monitoring, conducting and tracking the training activities of public health employees.

#### **Center for Community Preparedness by the Numbers:**

- Target Audience: 4,410,796

#### **Better Health**

The Centers for Disease Control and Prevention outlines goals and objectives that should govern each state's emergency preparedness programs.

- Goal 1 - Prevent Increase the use and development of interventions known to prevent human illness from chemical, biological, radiological agents, and naturally occurring health threats.
- Goal 2 – Detect and Report Decrease the time needed to classify health events as terrorism or naturally occurring in partnership with other agencies.
- Goal 3 – Detect and Report Decrease the time needed to detect and report chemical, biological, and radiological agents in tissue, food, or environmental samples that cause threats to the public's health.

- Goal 4 – Detect and Report Improve the timeliness and accuracy of communications regarding threats to the public's health.
- Goal 5 – Investigate Decrease the time to identify causes, risk factors, and appropriate interventions for those affected by threats to the public's health.
- Goal 6 – Control Decrease the time needed to provide countermeasures and health guidance to those affected by threats to the public's health.
- Goal 7 – Recover Decrease the time needed to restore health services and environmental safety to pre-event levels.
- Goal 8 – Recover Increase the long-term follow-up provided to those affected by threats to the public's health.
- Goal 9 – Improve Decrease the time needed to implement recommendations from after-action reports following threats to the public's health.

The following details the strongest evidence of the results produced by this program:

Trust for America's Health Report: Ready or Not? (This report scores states based on their readiness as shown by 10 indicators .)

Link: <http://healthyamericans.org/reports/bioterror08>

- 2006: 6 out of 10
- 2007: 8 out of 10
- 2008: 10 out of 10

National Report Card on State Emergency Management (This Report scores states based on their overall readiness.)

Link: <http://www.emreportcard.org/Louisiana.aspx>

- 2008: Disaster Preparedness - Score received: 'A'

Strategic National Stockpile Technical Assistance Review (Assessment of state's ability to receive and deploy federal resources.)

- 2007: 83%
- 2008: 94%
- 2009:100%

Medical Special Needs Shelters

- Over 8000 shelterees were cared for in the Medical Special Needs shelters during

Hurricanes Gustav and Ike.

The activities of the CCP are mandated by several state and federal requirements, which include:

- CDC Cooperative Agreement
- Public Health Emergency Response (PHER) Grant
- Hospital Preparedness Program (HPP) Grant
- Louisiana Health Emergency Powers Act
- Robert T. Stafford Act
- Louisiana Emergency Operations Plan 2009 (Update)

#### Community Outreach

- A list of the partners/stakeholders is attached.

#### Workforce Development

- More than 3300 current and former OPH employees have accessed the OPH learning management system since its implementation in 2003.
- More than 30,000 individual training assignments housed in this system

#### Volunteer Management

- During Hurricanes Gustav and Ike, the Emergency Systems for Advance Registration of Volunteer Health Professionals (ESAR-VHP) and the State Medical Reserve Corps (MRC) collectively deployed over 1500 volunteers across the state.
- Currently maintains a database with over 3,000 volunteers.